FINAL EVALUATIONS - PGY 1

MARSHALL SURGERY RESIDENCY PROGRAM - 2013-2014

Resident Name: REBECCA KLUG

Date: 6/6/14

			Summary of E	valuations			
	Patient Care	Medical Knowledge	PB Learning	Interpersonal Communication	Professionalism	System based Practice	Overall
Faculty/Chief/Peer Evaluations	3.40	3.40	3.38	3.45	3.44	3.45	3.42
3.4			Procedures - Co	ompetency	Control Carlos		
Procedure			Com	pleted?		t to Perform ndently?	PD Approval
MEDIPORT INSERTIO	N			1		•	
CONSCIOUS SEDATION	N			1			

Remediation

YES 🗆

NO ×

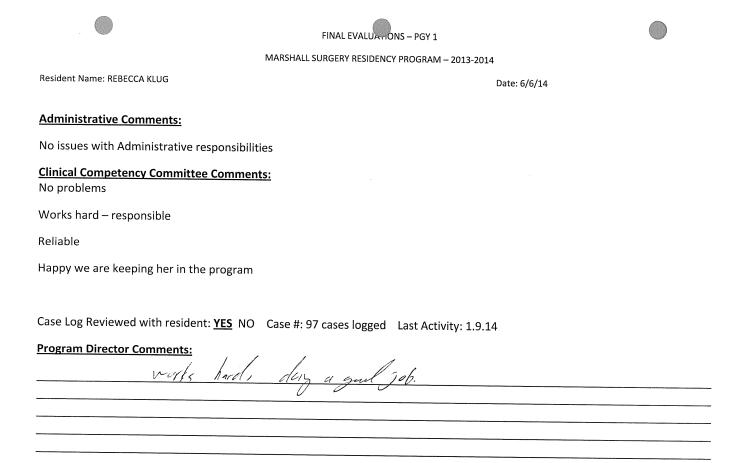
Research? No Research

Step III: - Taken and Passed - 203

Conference Attendance – not in compliance - 72%

ACS Fundamentals of Surgery Curriculum – did not complete – completed 30 0f 94 modules

ABSITE Score 1%



	FIN		
	MARSHALL SURGI	ERY RESIDENCY PROGRAM – 2013-2014	
Resident Name: REBECCA KLUG Program Director Recon		Date: 6/6/14	
	Needs to read	·	
	Inprove ABSITE Scare		
	Start on research		
Program Director:		Resident Signature:	
3 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		Nesident signature:	

MIDPOINT EVALUATIONS - PGY 2

2014-15

MARSHALL SURGERY RESIDENCY PROGRAM

Name: REBECCA KLUG, MD Date of Evaluation: 11.25.14

	Patient Care	Medical Knowledge	1 '	ns Based actice		Learning a		Pr	rofessio	nalism	Interpers Skills a Communic	nd		
MILESTONE	PC 1-2.5	MK1 -2.5	SBP1 -2.5		PBLI1	-1.5		PROF1-3			ICS1-2			
LEVELS PER C3 MTG 11.18.14	PC 2 – 2.5	MK 2- 2.5	SBP2 -2.5 PBLI2-1.5			PROF2-3			ICS2-2					
WIIG 11.18.14	PC 3 - 1.5				PBLI3	BLI3-1.5 PROF3-3			ICS3-2					
360° Evaluations														
Patient	NONE COLL	ECTED												
Evaluations		200 (110 (110 (110 (110 (110 (110 (110 (
		ng kecampangan	1000			Educa	ation		,			Open of the second		
Completion of S			ya !	11	Not as	much a	1 sh	Show	11					
Conference atte	ndance =>809	%	88%	/										
Exposure or participation in 50% of SCORE Curriculum Procedures assigned AND CORRESPONDING SCORE MODULES COMPLETED		Lap Ex	Lap Repair Ing.Fem Hernia	Open V Repair Ventral Hernia	Open √ Chole w/wo Cholangio	Lap Cho w/wo) 1	Lap Liver BX	Perc Liver BX	Perc Endo Gastrostomy	Open SBR	Open Adhesiolysis	lleostomy	
		Ileostomy Closure	Open Feeding Jejun,	Open Partial Colectomy	Colostomy	Esophago	2000	√ Bronch	Lumpectomy	Total/Skin Sparing	Sen. V Lymp Node BX	Venous Insuff. Op for Varicose Veins	Arteriovenous Graft/Fistula	
Write and subm	to a state or	national	Origs	a-M	Trains	·	Lesophage	ogas	Bronch	Lumpectomy	Mastec.	ВХ	veins	Grant/Fistula
meeting for post	ter or oral pre Citi Training Co		NO)											
ACLS and ATLS Training and Certification														
current			YES											
Remediation?			NO											
			100			Case Logs	5						(Alekser)	
Case Logs Revie	wed with Resi	dent?	YES — Ha	s logged the end	97 cases a of the yea	as of 11.24 or to achie	1.15. Has ve her 2!	not lo 50 cas	ogged a ses requ	ny cases sin ired by the	ce January 2 ABS.	2014. Sh	e need 153	more



MARSHALL SURGERY RESIDENCY PROGRAM

	Required Bedside Procedures -	Competency
Procedure	Completed?	Credentialed to Perform Independently?
ADULT INTUBATION	0	NO
ADULT VENT MANAGEMENT	0	NO
CONSCIOUS SEDATION	1	NO

ADMINISTRATIVE RESPONSIBILITIES:

DR. KLUG HAS A PROBLEM WITH HER ADMINISTRATIVE RESPONSIBILITIES. SHE IS LATE LOGGING CASES, DUTY HOURS, BEDSIDE PROCEDURES, ALLSCRIPTS TASKS, EVALUATIONS, SIGNATURES, M&M LISTS AND IS FREQUENTLY ON THE DELINQUENT MEDICAL RECORDS LIST AT SMMC AND CHH. DR. KLUG IS CREDENTIALED IN ALL THE BEDSIDE PROCEDURES EXCEPT ADULT INTUBATION, ADULT VENT MANAGEMENT AND CONSCIOUS SEDATION. CONCERNED ABOUT LACK OF CASES LOGGED.

COMMENTS FROM FACULTY EVALUATIONS:

- SATISFACTORY PERFORMANCE ON FLOOR. NURSES RESPOND WELL TO HER. HAS BASIC SKILLS AND DOES WARD PROCEDURES WELL. BEGINNING TO COME TO SURGERY AND INTERACT APPROPRIATELY. KNOWS WHEN TO ASK FOR ASSISTANCE. DOES VERY WELL WITH THE TEAM. ENERGETIC. ASKS APPROPRIATE QUESTIONS. SOMETIMES SLOW, OCCASIONALLY FORGETS. LISTENS TO COMMENTS AND CRITICISM AND REACTS AND LEARNS. WANT TO EDUCATE STUDENTS. QUIET. GOOD COMMUNICATOR TO PATIENTS AND FAMILIES. DOWN TO EARTH. SATISFACTORY PERFORMANCE THUS FAR. SEEMS TIMID ON OCCASION, WORKS WELL WITH OTHERS.
- DOING WELL. NEEDS TO WORK MORE EFFICIENTLY TO GET WORK DONE AND WILL GET MORE OUT OF OPERATING ROOM.

COMMENTS FROM CCC MEETING NOVEMBER 18, 2014

- WORKS HARD
- TENTATIVE
- READS AND COMPREHENDS
- MAKING GOOD PROGRESS
- STAYS IN THE BACKGROUND



MARSHALL SURGERY RESIDENCY PROGRAM

STRENGTHS:

- COMMUNICATION SKILLS WITH PATIENTS AND THEIR FAMILIES
- TEAMWORK

WEAKNESSES/AREAS OF IMPROVEMENT:

- WORK ON CONFIDENCE
- WORK ON SPEEDING UP FLOOR WORK SO SHE CAN GET MORE TIME IN OR
- NEEDS TO READ MORE AND USE SCORE CURRICULUM

SELF-ASSESSMENT COMMENTS: GOALS TO WORK ON OVER THE NEXT SIX MONTHS:

- TIME MANAGEMENT
- PROFESSIONAL INTERACTIONS
- RESEARCH

ROTATIONS COMPLETED SINCE JULY 2014

- GEN SURG-JULY/AUGUST
- BREAST SEPT/OCT
- ENDOSCOPY NOV/DEC IN PROGRESS

DOES THIS RESIDENT NEED REMEDIATION FOR ANY ISSUES?

NO

PROGRAM DIRECTOR COMMENTS/PLAN OF ACTION:
work on research and Then mayors
adhinistrator tarto na die se conflere sedule pracoches for by the seal
So have assay Prine